

APPLICATION REQUEST FOR ASSOCIATE BADGE

VISIT INFORMATION

1. Purpose of Visit: <input type="checkbox"/> Daycare, Specify final date child(ren) will attend: _____ (Requires Daycare Director's Signature) <input type="checkbox"/> Wellness Center (Attach paid receipt.) <input type="checkbox"/> Carpool (Must be in an established carpool.) How many times a week do you carpool? _____ Justification: _____ <input type="checkbox"/> MARS Sporting Activity, Please specify _____ Must be sponsored by activity president.	2. Proposed Expiration Date: _____
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ASSOCIATE INFORMATION

3. Legal Name (No Nickname) (Print): <small>Last First M.I.</small>	4. Drivers License Number:	4a. State:	5. Social Security Number:	6. Citizenship:		
7. Place of Birth (City/State):	8. Date of Birth:		9. Home Address:			
10. Home Phone Number:	11. Cell Phone Number:					
12. Employer:	13. Employer Phone Number:					
15. Naturalization Number:	16. Naturalization Date:		14. Employer Address:			
17. Naturalization Place:	18. Sex:	19. Race:			20. Eye Color:	21. Hair Color:

SPONSOR INFORMATION

24. Sponsor's Name (Print):	25. Sponsor's Organization:	26. Sponsor's Company:
27. Sponsor's Phone Number:	28. Sponsor's E-mail:	

ADDITIONAL INFORMATION

- Associate badges are issued for a period not to exceed 1 year.
- Sponsor may enter the associate into the Visitor Management System (VMS) for a 14-day visitor badge.
- Badge recipient must have a favorable NCIC (Background) check.
- The Protective Services Office (PSO) (AS50) will notify the sponsor when the badge recipient can obtain their badge from Building 4312.
- Sponsor must accompany the person receiving the badge.
- Associate badges and/or key cards must be returned to Building 4312 on Digney Road when no longer needed or expired.
- Two forms of government issued ID in their original form are required; one must be a picture ID. Naturalized citizens must bring either their naturalization certificate or U.S. Passport.
- Submit this application to the PSO via encrypted e-mail (PKI) to Rebecca.B.Hopson@nasa.gov; mail to AS50/Protective Services or fax to 544-2101.

RESPONSIBILITY NOTICE

This badge is to be used solely for the purpose identified above. The sponsor shall ensure that when the badge is no longer required for the purpose listed or when the badge expires, it will be immediately returned to the Identification and Registration (I&R) at Building 4312. Lost or missing identification badges shall be reported to I&R immediately.

29. Associate Signature:	30. Date:
31. Sponsor's Signature:	32. Date:
33. Daycare Director's Signature: (Only required for Daycare access)	34. Date:

PRIVACY ACT INFORMATION

NASA is authorized to collect the information on this form under the provisions of 42 U.S.C. 2455. Providing this information is voluntary. The principal purpose for which this information will be used is to determine qualifications for access to NASA installations. This information will be incorporated into the Security Records Systems – NASA. The information will be used to provide data to federal intelligence, investigative and law enforcement agencies and to state and local law enforcement agencies. If the information is not furnished, an identification card will not be issued and access to the installation will be denied.